| PATENT APPLICATION FEE DETERMINATION RECORD  Effective January 1, 2003  |  |   |                 |                                |              |                  |         |   |                        |         |                     |                        |  |
|---|--|---|-----------------|--------------------------------|--------------|------------------|---------|---|------------------------|---------|---------------------|------------------------|--|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                 |                                |              |                  |         | SMALL ENTITY TYPE                       |                        |         | OTHER THAN          |                        |  |
| TOTAL CLAIMS  |  |   | 10              |                                | :            |                  | Γ       | RATE                                    | FEE                    | ]       | RATE                | FEE                    |  |
| FOR   |  |   | NUMBER FILED    |                                | NUMBER EXTRA |                  | В       | ASIC FEE                                | 375.00                 | OR      | BASIC FEE           | 750.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |  |   | 10 minus 20=    |                                | * &          |                  |         | X\$ 9=                                  |                        | OR      | X\$18=              | _                      |  |
| INDEPENDENT CLAIMS  |  |   | √ minus 3 =     |                                | 0            |                  | Γ       | X42=                                    |                        | OR      | X84=                | -                      |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |                 |                                |              |                  | T       | +140=                                   |                        | OR      | +280=               |                        |  |
| * If the difference in column 1 is less than zero, enter  |  |   |                 |                                | "0" in c     | olumn 2          | L       | TOTAL                                   |                        | OR      | TOTAL               | 750                    |  |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)   |  |   |                 |                                |              |                  |         | OTHER THAN SMALL ENTITY OR SMALL ENTITY |                        |         |                     |                        |  |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | ŕ               | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>DUSLY | PRESENT<br>EXTRA |         | RATE                                    | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | * 10                                      | Minus           | ** &                           | 20           | =                |         | X\$ 9=                                  |                        | OR      | X\$18=              |                        |  |
|   | Independent + 1                                |   | Minus ***       |                                | 3            |                  |         | X42≃                                    |                        | OR      | X84=                |                        |  |
| 7   | 12-109 104)                                    |   | ·               |                                | CLAIM        |                  |         | +140=                                   |                        | OR      | +280=               |                        |  |
|   |  |   |                 | -                              | _            | <i></i>          | AI      | TOTAL<br>DDIT. FEE                      |                        | OR      | TOTAL<br>ADDIT, FEE |                        |  |
|   |  | (Column 1)                                |                 | (Colur                         |              | (Column 3)       |         |   |                        |         |                     |                        |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | HIGH<br>NUM<br>PREVIO<br>PAID  | BER<br>OUSLY | PRESENT<br>EXTRA |         | RATE                                    | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus           | **                             |              | 3                |         | X\$ 9=                                  |                        | OR      | X\$18=              |                        |  |
|   | Independent                                    | *<br>NTATION OF MU                        | Minus           | ***                            | CLAIM        | -                |         | X42=                                    |                        | OR      | X84=                |                        |  |
|   |  |   | JE EE OE.       | LITOLITY                       | OCAM         | <u></u>          | , [     | +140=                                   |                        | OR      | +280=               |                        |  |
|   |  |   |                 |                                |              |                  | ΑE      | TOTAL<br>DDIT. FEE                      |                        | OR      | TOTAL<br>ADDIT, FEE |                        |  |
|   | (Column 1) (Column 2) (Column 3)               |   |                 |                                |              |                  |         |   |                        |         |                     |                        |  |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | HIGH<br>NUM<br>PREVIO<br>PAID  | BER<br>DUSLY | PRESENT<br>EXTRA |         | RATE                                    | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus           | **                             |              | =                |         | X\$ 9=                                  |                        | OR      | X\$18=              |                        |  |
|   | Independent                                    | *   | Minus           | ***                            |              | =                | 1       | X42=                                    |                        | OR      | X84=                |                        |  |
| نــا  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                 |                                |              |                  | 1       | +140=                                   |                        |         | 1200                |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3  |  |   |                 |                                |              |                  |         |   |                        | OR      | +280=               |                        |  |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in co |  |   |                 |                                |              |                  |         |   |                        |         | ADDIT. FEE          |                        |  |
|   | The *Highest Nun                               | nber Previously Pa                        | id For (Total o | r Independ                     | ent) is the  | highest numbe    | er foun | d in the app                            | oropriate box          | ( in co | lumn 1.             |                        |  |

Application or Docket Number